

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKBrendan Hunt

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Cpt. Nicole Papamichael (NYPD)AMENDED  
COMPLAINT

15 CV 5474 (LAP)

AMENDED  
COMPLAINT

under the Civil Rights Act,

42 U.S.C. § 1983

Jury Trial:  Yes  No  
(check one)

Civ. ( )

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

USDC SDNY  
DOCUMENT  
ELECTRONICALLY FILED  
DOC #: \_\_\_\_\_  
DATE FILED: 11/6/15

## I. Parties in this complaint:

A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff's Name Brendan Hunt  
ID# \_\_\_\_\_  
Current Institution \_\_\_\_\_  
Address 80-35 213th Street  
Hollis Hills NY 11427

B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name Cpt. Nicole Papamichael Shield # \_\_\_\_\_  
Where Currently Employed City of New York  
Address \_\_\_\_\_

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Defendant No. 2 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

Defendant No. 3 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

Who did what?

Defendant No. 4 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

Defendant No. 5 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

Zuccotti Park, Lower Manhattan

\_\_\_\_\_

B. Where in the institution did the events giving rise to your claim(s) occur?

On the steps leading out of the park

C. What date and approximate time did the events giving rise to your claim(s) occur?

July 11, 2013, some time in the afternoon

\_\_\_\_\_

D. Facts: My right to freedom of expression, freedom of speech and freedom of assembly were violated by Cpt. Nicole Papamichael. On July 11, 2013, I was playing a drum in Zuccotti Park as part of an Occupy

What happened to you?

Wall Street gathering. The police had told drivers many times before that drums had to be played inside the park, in fact, I have such an exchange on camera from a different day. On July 11, 2012, however, Capt. Nicole Papamichael came over to me and said no drums in the park. Although I didn't understand why, I didn't question her orders, and I immediately complied, heading straight down the steps to exit the park. As I was about to reach the last step, Papamichael came up behind me and said "too late", grabbed my arm and initiated this unjust arrest. I have the entire exchange on camera, filmed from multiple locations. I was put in handcuffs, the sign on my back was flipped over by her, in what appears on camera to be a deliberate move to hide political speech. The arrest, and manhandling by the officers under Papamichael's command, left me bloody and bruised.

Was anyone else involved?

Who else saw what happened?

### III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

I sustained open wounds on my wrists from the handcuffs which were made of plastic and cut into my skin. I was also punched in the stomach by an Officer Ditsrich in the police van for no apparent reason. I did not seek medical treatment at that time because the officers said I'd be in jail for a long time if I did.

### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes  No

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

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B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes  No  Do Not Know

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes  No  Do Not Know

If YES, which claim(s)?

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D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes  No

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes  No

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

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1. Which claim(s) in this complaint did you grieve?

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2. What was the result, if any?

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3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

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F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

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2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any:

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount) For asking for \$10,000

based on the physical and emotional toll that  
this ordeal has put me through. It has hurt  
me so much a award for your's and illness  
monetary compensation would help to set this right.

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**VI. Previous lawsuits:**

On these claims

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes  No

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff \_\_\_\_\_  
Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes  No

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

On other claims

C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes  No

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff \_\_\_\_\_  
Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

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6. Is the case still pending? Yes        No         
If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?)  
\_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 4 day of November, 2015.

Signature of Plaintiff

Inmate Number

~~Inmate~~ Address



80-38 783rd Street  
Staten Island NY 10428

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 4 day of November, 2015, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: \_\_\_\_\_